

## Application to Revise a Notice of Intention to Commence Small Mining Operations or Exploration

|  |         |  |  |
|--|---------|--|--|
| <b>Operator:</b> Gold Star Stone, INC  |         |  |  |
| <b>Mine Name:</b> Sierra Starlight Quarry  |         | <b>File Number:</b> E or M/ S / 003/049        |  |
| Provide a detailed listing of all changes to the Notice that will be required as a result of this change. Individually list all maps and drawings that are to be added, replaced, or removed from the Notice. Include page, section and drawing numbers as part of the description.      |         |  |  |
| <b>DETAILED SCHEDULE OF CHANGES TO THE NOTICE</b>  |         |  |  |
|  |         |  | Description of map, text, or materials to be changed |
| ADD  | REPLACE | REMOVE   | Page 1 and 2 of Notice of Intention to commence SMO  |
| ADD  | REPLACE | REMOVE   |  |
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| ADD  | REPLACE | REMOVE   |  |
| <b>I hereby certify that I am a responsible official of the applicant and that the information contained in this application is true and correct to the best of my information and belief in all respects with the laws of Utah in reference to commitments and obligations, herein.</b> |         |  |  |
| <u>Barry R Peterson</u><br>Print Name  |         | <u>Barry R Peterson</u><br>Sign Name, Position |  |
|  |         | <u>7-18-07</u><br>Date                         |  |

**Return to:**

State of Utah  
Division of Oil, Gas and Mining  
Attn: Minerals Regulatory Program  
1594 West North Temple, Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801  
Phone: (801) 538-5291 Fax: (801) 359-3940

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|                                  |  |
|----------------------------------|--|
| <b>FOR DOGM USE ONLY:</b>        |  |
| File #: M/ /                     |  |
| Approved: _____                  |  |
| Bond Adjustment: from (\$) _____ |  |
| to \$ _____                      |  |

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Div. of Oil, Gas & Mining

This Section for DOGM Use:

Assigned DOGM File No.: S/003/049

DOGM Lead: \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ Ck # \_\_\_\_\_

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
**DIVISION OF OIL, GAS AND MINING**  
1594 West North Temple Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801  
Telephone: (801) 538-5291 Fax: (801) 359-3940

**NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS**

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1987, and the General Rules as promulgated under the Utah Minerals Regulatory Program.

"Small Mining Operations" mining operations which have a disturbed area of five or less surface acres at any time.

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**I. GENERAL INFORMATION (Rule R647-3-104)**

1. Name of Mine: Sierra starlight Quarry
2. Legal name of entity (or individual) for whom the permit is being requested: Cold Star Stone, Inc  
Mailing Address: 1648 S 600W  
City, State, Zip: Oakley, ID, 83340  
Phone: 208-862-9204 Fax: \_\_\_\_\_  
E-mail Address: N/A

Type of Business: Corporation ☒ LLC ( ) Sole Proprietorship (dba) ( )  
Partnership ( ) General \_\_\_\_\_ or \_\_\_\_\_ limited  
**Or:**  
Individual ( )

**Entity must be registered (and maintain registration) with the State of Utah, Division of Corporations (DOC) [www.commerce.utah.gov](http://www.commerce.utah.gov).**

Are you currently registered to do business in the State of Utah? ☐ Yes ☐ No

Entity # 6112480-0143

If no, contact [www.commerce.utah.gov](http://www.commerce.utah.gov) to renew or apply.

Local Business License # \_\_\_\_\_ (if required)

Issued by: County \_\_\_\_\_ or City \_\_\_\_\_

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**DIV. OF OIL, GAS & MINING**

3. **Contact Person(s)**  
Name: Barry Peterson Title: President  
Address: 1648 S 600W  
City, State, Zip: Oakley ID 83346  
Phone: 208-862-9204 Fax: \_\_\_\_\_  
Emergency, Weekend, or Holiday Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**Contact person to be notified for: permitting (X) surety (X) Notices (X) (please check all that apply)**

Name: Barry Peterson Title: President  
Address: see # 3  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Emergency, Weekend, or Holiday Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**Contact person to be notified for: permitting (X) surety (X) Notices (X) (please check all that apply)**

Registered Utah Agent (as identified with the Utah Department of Commerce) (if individual leave blank):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

4. **If Business is a Sole Proprietor:**

**Sole Proprietor:**

Name of Owner: \_\_\_\_\_ Title: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**If Business is a Corporation:**

Name of Officers: Barry Peterson Title: President  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Title: \_\_\_\_\_  
Title: \_\_\_\_\_  
Title: \_\_\_\_\_

Headquarters Address: see # 3  
City, State, Zip: \_\_\_\_\_  
Headquarters Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**If Business is a Limited Liability Company:** Member Managed ☐ Manager Managed ☐

Name of 1<sup>st</sup> Member/Manager: \_\_\_\_\_ Title: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_